

PLEASE NOTE: YOU MUST COMPLETE THE **FOLLOWING**



BIRCH, STEWART, KOLASCH & BIRCH, LLP P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	PROCESS FOR THE PREPARATION OF DENTURES								
Fill in Appropriate Information - For Use Without	the specification was	n is attached hereto. If not a s filed on cation Number	ttached hereto,			as			
Specification	and amended on	(if applicable) and/or as PCT ; and was							
Attached:	the specification wa	as РС Г							
	amended on	; and was							
	amended on								
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.5 I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows. I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that the application on which priority is claimed:								
. 5	Prior Foreign Applicat	ion(s)			Priority C	laimed			
Insert Priority	199 38 144.5	Commany	۸.	igust 16 1999					
Insqifffation: (if appropriate)	(Number)	Germany (Country)		ugust 16, 1999 Ionth/Day/Year Filed)	⊠ V				
	(Transcry	(Country)	(10	ionth/Day/ Fear Filed)	Yes	No			
	(Number)	(Country)	(N	fonth/Day/Year Filed)	Yes	□ No			
1.5 (100)	(Number)	(C							
ı 📥	(Number)	(Country)	(V.	1onth/Day/Year Filed)	Yes	No			
	(Number)	(Country)		Ionth/Day/Year Filed)	□ Yes	□ No			
	· ·	•		United States provisional applicat		100			
	Thereby claim the benefit	tunder True 35, Office Sta	ics Code, \$119(e) of any	Officed States provisional applicat	ions(s) listed below.				
Insert Provisional Application(s): (i'' '')	(Application Number) (Filing Date)								
	(Application Number)								
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:								
	Country	Applica	ition Number	Date of Filing (Montl	n/Day/Year)				
Insert Requested Information: (if appropriate)									
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.								
Insert Prior U.S. Application(s): (if any)	(Application Number)	(Filing	Date)	(Status - patented, per	nding, abandoned)				
	(Application Number)	(Filing	Date	/Ctatus material	oding short1)				
Page 1 of 2 (Rev. 12/19/01)	(Approximation runner)	(i ting	Duicj	(Status - patented, per	iding, abandoned)				



I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in-connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE: YOU MUST

COMPLETE FOLLOWING:

BIRCH, STEWART, KOLASCH & BIRCH, LLP of CUSTOMER NO. 2292

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may reporting the validity of the application or any patent issued the real.

* 3	peopardize the validity of the application or any paten	it issued thereon.		Table Statemen				
or Sole Inventor:	GIVEN NAME/FAMILY NAME	GIVEN NAME/FAMILY NAME						
In an Name of The Name of The Name of The This Document is Signed	Sybille FRANK	Sabille Franz		DATE* 20.3.2002				
Insert Residence	Residence (City, State & Country)	290	CITIZENEU					
Insert Residence Insert Citizenship →	Seefeld GERMANY DEX		CITIZENSHI German	iP				
Insert Post Office				*				
Address →	An der Breite 2a. D-82229 Seefeld	MAILING ADDRESS (Complete Street Address including City, State & Country) An der Breite 2a, D-82229 Seefeld GERMANY						
Ø ≥		JERUMI						
ne of Second	GIVEN NAME/FAMILY NAME	NTOR'S SIGNATURE		DATE*				
	'Holger HAUPTMANN	tales 46		15.03.200				
	Residence (City, State & Country)		CITIZENSHI					
<u> </u>	Sindelsdorf GERMANY DEX	·	German					
	MAILING ADDRESS (Complete Street Address inc	icluding City, State & Country)						
	Weilbergstrasse 32, D-82404 Sindel:	Weilbergstrasse 32, D-82404 Sindelsdorf CERMANY						
Full Name of Third	GIVEN NAME/FAMILY NAME	INVENTODIC CIONATUDE						
Inventor, if any: see above	Stefan HÖSCHELER	INVENTOR'S SIGNATURE		DATE*				
	Residence (City, State & Country)	Joy Hos-	CITIZENELL	1/2/03/2002				
a para		DMANN ().	CITIZENSHIE	Ρ ' '				
3 -		RMANY OCX	German					
	MAILING ADDRESS (Complete Street Address including City, State & Country) Hedwigstrasse 18, D-82229 Seefeld GERMANY Pilsenseestrasse 9a							
\mathcal{G} \mathcal{I} \mathbb{U}		D-82211 Herrsching GERMANY						
full Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	1	DATE*				
	Robert SCHNAGL	Port Sile	-//	12.03.2002				
\ <u>'</u>	Residence (City, State & Country)	/	CITIZENSHIP					
!	Landsberg GERMANY NEX		German					
1	MAILING ADDRESS (Complete Street Address including City, State & Country)							
- 7	Von Eichendorff-Strasse 35, D-86899 Landsberg GERMANY							
ull Name of Fifth 5.00	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		T				
see above	Daniel SUTTOR	INVENTOR'S SIGNATURE	,	DATE*				
	Residence (City, State & Country)	Wanas Jubic	TOTTOTAL	73.03.02				
!	Seefeld GERMANY		CITIZENSHIP German	'				
		· · · · · · · · · · · · · · · · · · ·	German					
1	MAILING ADDRESS (Complete Street Address including City, State & Country) Houghstrasse 31 - D-82229 Seefeld CERMANY Franz-Kraemer-Strasse 4							
all Name of Sixth	D-82229 Seefeld GERMANY							
Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
			1					
7	Residence (City, State & Country)		CITIZENSHIP	,				
1	1							
1	MAILING ADDRESS (Complete Street Address inc!	MAILING ADDRESS (Complete Street Address including City, State & Country)						
1	1							
,	Activities to the second secon							

Page 2 of 2 (Rev. 12/19/01)

^{*}DATE OF SIGNATURE